

**2005 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2005**

DOCUMENT # A94000000397

1. Entity Name

LEE MANOR INVESTMENTS, LTD.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 FEB -7 AM 9:35

Principal Place of Business

155 5TH AVE. SO., #5
ST. PETERSBURG FL 33701

Mailing Address

P.O. BOX 21458
ST. PETERSBURG FL 33742

2. Principal Place of Business

PO Box 21458
Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.



1ST MOORE

CR2E003 (10/04)

City & State

ST PETERSBURG FL

City & State

ST PETERSBURG FL

Zip

33742 Pinellas

Country

Pinellas

Zip

33742

Country

Pinellas

4. FEI Number

59-3265505

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

EDWARDS, ROGER L
155 5TH AVE. SO. #5
ST. PETERSBURG FL 33701

7. Name and Address of New Registered Agent

Name *EDWARDS, ROGER L*
Street Address (P.O. Box Number is Not Acceptable)
6497 Cape Hatteras Way NE
APT # 4
City *ST PETERSBURG* FL Zip Code *33702*

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

DATE

9. Capital Contributions
as Shown on record.

\$1,000.00

10. Amount of Capital Contributions
in FLORIDA to date.

\$1,000.00

11. FILE NOW!!! Due by May 1, 2005
See Block 11 instructions for fee info.

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

DOCUMENT #
NAME EDWARDS, JANET L
STREET ADDRESS P.O. BOX 214580., #5
CITY-ST-ZIP ST. PETERSBURG FL 33742

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CITY-ST-ZIP

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13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

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STREET ADDRESS

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CITY-ST-ZIP

000046555878
02/15/05--01005--009 **141.25

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

JANET L. EDWARDS 02-05-05

Date

Daytime Phone #

727 418 7363

STAPLE CHECK HERE